

**Centre intégré
universitaire de santé
et de services sociaux
du Centre-Ouest-
de-l'Île-de-Montréal**

Québec 

Public Information Meeting CIUSSS West-Central Montreal

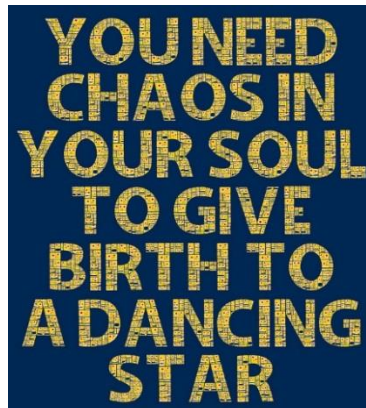
November 7, 2018

Creation of the CIUSSS

- Adoption of the Act to Modify the Organization and Governance of the Health and Social Services Network, in Particular by Abolishing the Regional Agencies (Bill 10)
- Goals
 - Facilitate and simplify public access to services
 - Improve the quality and safety of care
 - Make the network more efficient and effective.
- Consolidate and continue efforts to improve the health and social services system
- Create integrated health and social services centres (CISSS) and integrated health and social services **university** networks (CIUSSS) responsible for providing the majority of services for a given territory
- The network was reduced from 182 to 34 facilities

From a network of facilities to a network of patient services

- April 1, 2015 – the Act comes into force **Mergers**
- The province's health and social services network was reduced from 182 to 34 facilities
- Reorganization of all services → transversal structure



Portrait of the Quebec health and social services network

13 CISSSes

- Created by merging a region's public facilities with its Regional Agency, if applicable
- Management structure reduced from 3 to 2 hierarchical levels
- The hearts of their territorial networks

9 CIUSSSes

- Same model as the CISSSes
- Located in regions where a university offers a full pre-doctoral program in medicine or operates a university institute related to the social services
- Excludes university hospital centres, except CIUSSS de l'Estrie

11 unmerged facilities

- UHCs, university institutes and facilities are not subject to the Act

Portrait of the Montreal network

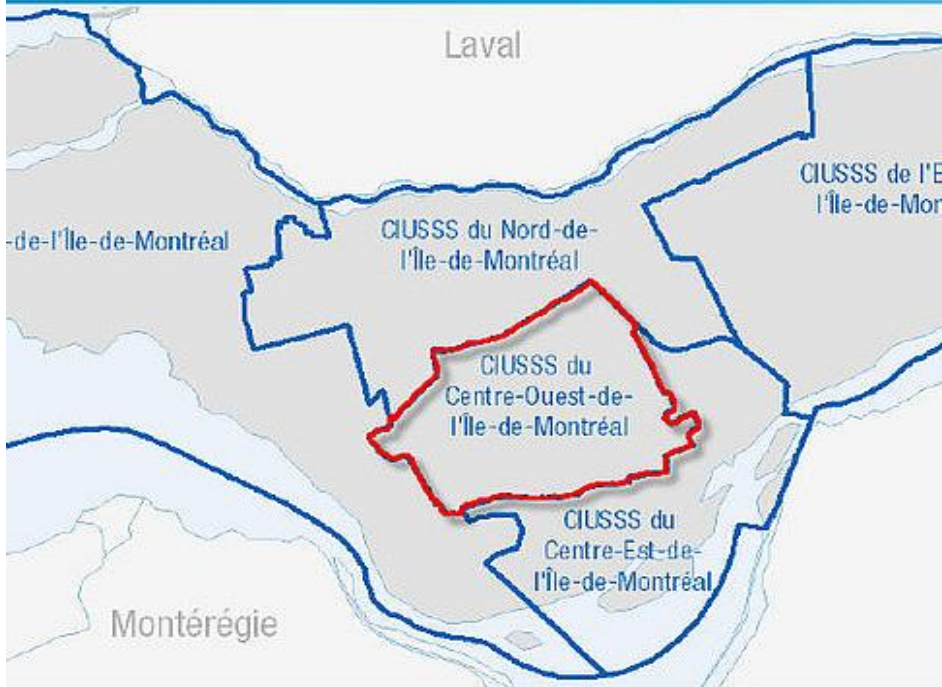
5 CIUSSSes

1. CIUSSS de l'Ouest-de-l'Île-de-Montréal
2. CIUSSS West-Central Montreal
3. CIUSSS du Centre-Sud-de-l'Île-de-Montréal
4. CIUSSS du Nord-de-l'Île-de-Montréal
5. CIUSSS de l'Est-de-l'Île-de-Montréal

5 unmerged facilities

6. Centre hospitalier de l'Université de Montréal (CHUM)
7. CHU Ste-Justine
8. McGill University Health Centre (MUHC)
9. Montreal Heart Institute
10. Institut Philippe-Pinel de Montréal

Island of Montreal



About us

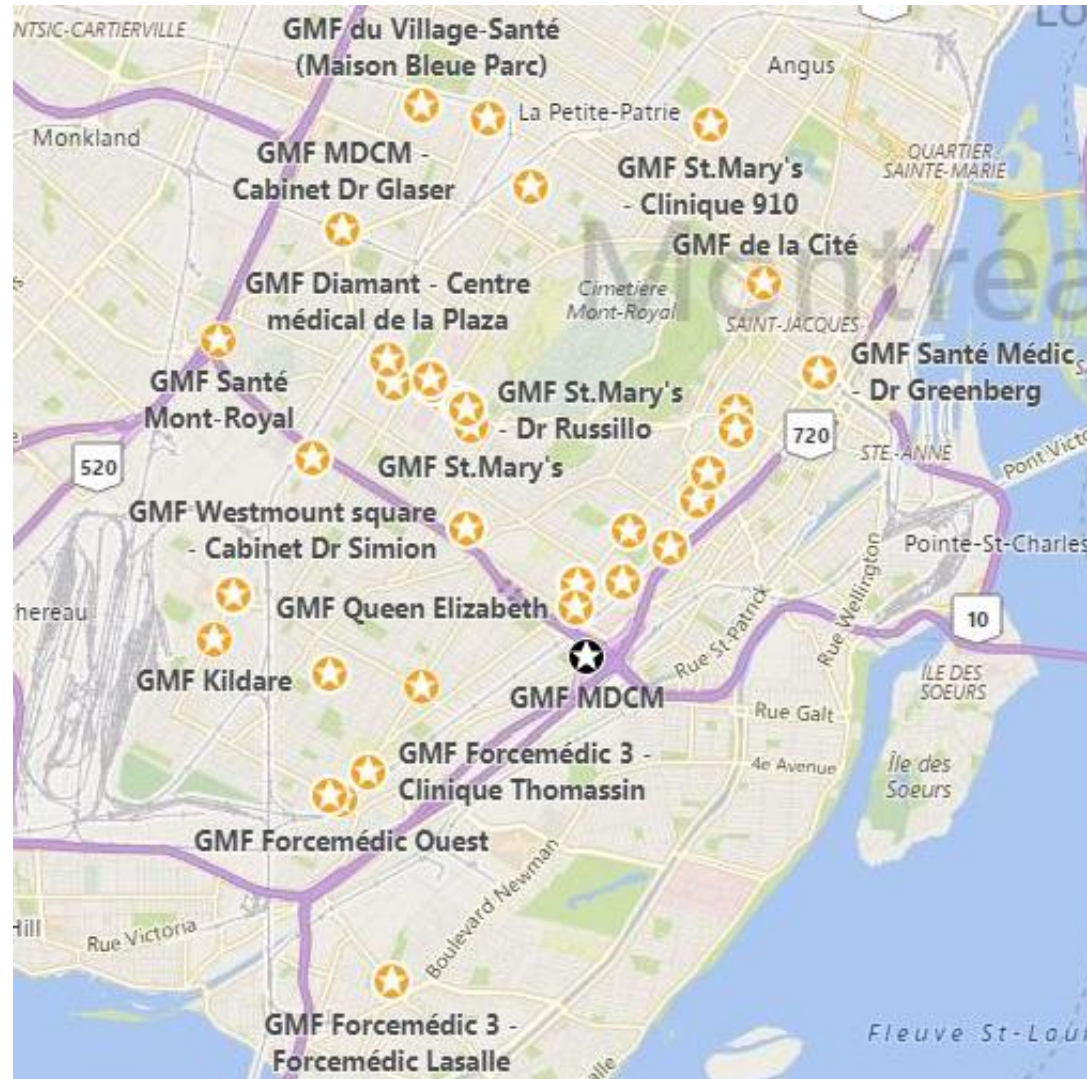
Our CIUSSS covers 54 km²

It partially or completely serves **five boroughs**:
Côte-des-Neiges/Notre-Dame-de-Grâce, Villeray/Saint-Michel/Parc-Extension, Rosemont/La Petite Patrie, Plateau Mont-Royal and Ville-Marie)

Five on-island suburban cities:

Hampstead, Westmount, Montreal West, Town of Mount Royal and Côte Saint-Luc

FMGs on the territory



CISSS-CIUSSS responsibilities

- The heart of a territorial network
- Delivery of care and services to the population on its territory
- Population health on its territory
- Oversight of service organization and synergy across its missions (CH, CLSC, CHSLD, CPEJ, CR)
- Conclude agreements with other facilities and organizations

The values of your CIUSSS

- Highest quality of care
- Compassion, dignity and respect (core value)
- Safety
- Teamwork
- Knowledge and innovation
- Community
- Integrity and accountability

The mission of your CIUSSS

- Provide the highest quality continuum of health care and social services throughout our network of institutions
- Provide compassionate care and services that are centred on the user and create an exceptional user experience
- Develop and promote leadership and excellence in health and social sciences education
- Advance health and social sciences knowledge and practices through excellence in research and innovation

CIUSSS facilities



Long-term care

Donald Berman Maimonides
Donald Berman Jewish
Eldercare
Saint Andrew Centre
Saint Margaret Centre
Henri Bradet Centre
Father Dowd Centre
Mount Sinai Hospital



Rehabilitation

- Miriam Home and Services
- Lethbridge-Layton-Mackay
- Catherine Booth Hospital
- Richardson Hospital



CLSC

- CLSC Benny Farm
- CLSC René Cassin
- CLSC Côte-des-Neiges
- CLSC Park Extension
- CLSC Metro
- Family Medicine Group (FMG): 15
- Super clinics: 6



Acute care

Jewish General Hospital

Regional mission

- For specific clinical services
 - Info-Santé and Info-Social
 - Motor, hearing and visual disabilities
 - Technical assistance
 - Neurological and respiratory rehabilitation
 - PRAIDA and radicalization prevention
- For specific groups in the population
 - English-speaking users
 - Support for the practice of certain religious traditions (Jewish and Presbyterian)

Supra-regional mission

- For specific clinical services
 - Oncology
 - High-risk pregnancies and neonatal care
 - Urology, urologic oncology, gynecological oncology
 - Surgery: cardiac, head and neck due to cancer, hepatobiliary, colorectal
 - Infectious disease including tuberculosis
 - Radicalization prevention team
 - Cochlear implant programming and rehabilitation
 - Hearing disability rehabilitation services
 - Ligne AAA (Elder Mistreatment Helpline)
- For specific groups in the population
 - Refugee and asylum seeker services (PRAIDA)
 - English-speaking users
 - Support for the practice of certain religious traditions (Jewish and Presbyterian)

Population served by the CIUSSS

345,275 people based on the 2016 census – 18% of the Montreal area

- Population breakdown
 - 17.3% age 65 and over (16.7% for Mtl)
 - 20% under age 18 (18.8% for Mtl)
 - 37% seniors living alone (36% for Mtl)
 - 42.1% immigrants (34% for Mtl)
 - 24.3% whose mother tongue is neither French nor English (18.3% for Mtl)
 - 18.9% single-parent families (20.5% for Mtl)
- Access to a family doctor
 - 48% in April 2015 (52.4% for Mtl)
 - 64.8% today (October 2018)

Population characteristics and health status

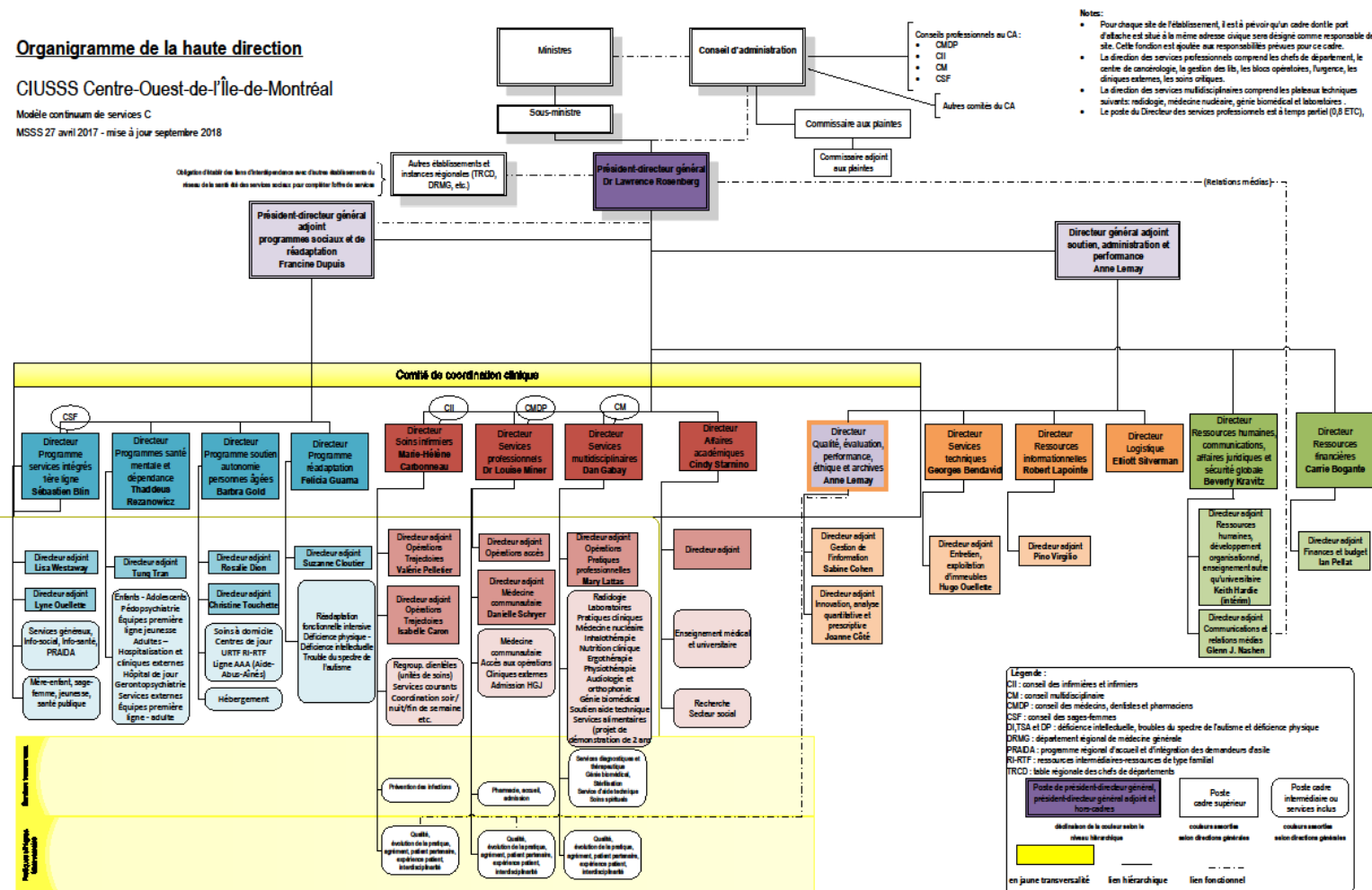
- **Income**
 - 22.9% under the low income after-tax cut-off (17.9% for Montreal)
- **Education**
 - 15.5% have no diploma or certification (16.9% for Montreal)
- **Lifestyle and chronic illness**
 - More housing of insufficient size or with mold
 - Less obesity (10.6% vs. 15.7%)
 - Fewer with at least one chronic illness (31.9% vs. 34.7%)
- **Highest life expectancy of all Montreal CIUSSSes**
- **Rate of avoidable mortality (70.9% vs. 89.4% in Montreal)**

Human resources

- **CIUSSS West-Central Montreal employs 9,973 people (9,730 in 2016-2017) representing 7,303 FTEs**
- **Most growth in SAPA, per MSSS objectives**
- **Breakdown by employee type**
 - 406 management staff (467 in 2016-2017)
 - 2,935 nursing staff (2,825 in 2016-2017)
 - 1,574 professionals (1,455 in 2016-2017)
 - 4,241 technical and office staff (4,198 in 2016-2017)
 - 983 workers, maintenance and service staff (990 in 2016-2017)
- **Over 400 physicians, including 137 general practitioners and nearly 300 specialists**

Medical clinics

- **Medical clinics and FMGs**
- 132 medical clinics, including 16 family medicine groups (FMG) and 50 medical clinics
 - 2 family medicine units (FMU) connected respectively to JGH Herzl and to CLSC Côte-des-Neiges, Metro, Park Extension
 - 600 family physicians, including 396 in FMGs
 - 9 specialized nurse practitioners (SNP) who practice in the FMGs/FPU
 - 449,571 patients registered with a family doctor practicing on the territory, including 335,981 by physicians practicing in FMGs (64.7%)



Overall achievements

Quality of care and service

- Creation of the Respect Campaign
- Recruiting, training and deployment of about twenty patient/user partners
- Overall improvement in hand hygiene compliance
- 45% reduction in infections caused by carbapenemase-producing organisms
- Interdisciplinary complex discharge planning team helped reduce length of stays and was recognized by Advisory Board International
- Significant improvement to imaging wait times
- Significant improvement to surgery wait times

Overall achievements

Performance of administrative, management and partnership services

- Beginning of the creation of 7 patient trajectories in the Integrated Practice Units (IPU)
- Consolidation of the financial, human and material resource management information systems for the different sites
- Creation of our unique patient index in all CIUSSSes
- Strengthened ties between the CIUSSSes, FMGs and pharmacies on the territory

Achievements: Department of Nursing

The Department of Nursing gave itself three strategic priorities: patient experience, access and academic

- Implementation of targeted rounds of hospitalized patients to improve patient safety and experience. Initial results:
 - Fewer falls
 - More effective communication
 - Fewer uses of nurse call button
 - Launch of the Symptom Management Hotline to help patients and reduce emergency department visits
- Creation of an action plan to deploy 140 specialized nurse practitioners
- Launch of evaluative research on patient deterioration risks
- Leadership training program for 25 head nurses

Achievements: Professional Services Directorate

- Consolidation of the Antibiotic Stewardship Program
- Ongoing sequential rollout of a medication management information system at the Jewish General Hospital
- Appointment of a bed management coordinator to reduce emergency department crowding

Achievements: Multidisciplinary Services Directorate

- Completed deployment of the pilot phase of the Help Project to maintain the functional autonomy of hospitalized patients
- Audit of the centralized sterilization processes showed good performance
- All technologists obtained the title of Technologue autonome and passed their ultrasound inspection

Achievements: Integrated Frontline Services

- Under the PRAIDA program, an average of 985 people sheltered daily and 23,609 unique users received psychosocial services
- 21,228 new people on the territory registered with a family doctor for a rate of 64.8%
- With the addition of 3 new FMGs, the territory is now served by 16 FMGs and 6 new super clinics.
- Co-lead of the Age 0-7 IPU for children with developmental delay
- Co-lead of the perinatal mental health IPU
- Completion of 100% of the deliverables for the Montreal public health regional integrated action plan
- 17% increase in flu vaccinations

Achievements: Intellectual Disability Rehabilitation Services

- Addition of 4 subsidized beds at the Guimont Complex of Miriam Home and Services for ID-ASD users with severe behavioral problems and opening of 3 new intermediate resources
- Creation of the innovative TranXition project for youth aged 15 to 25 living with a physical disability (transition to adulthood), subsidized by the MAB-Mackay Foundation
- Creation of an access desk for ID-ASD-PD rehabilitation services
- 50% reduction in wait times for children with an ASD
- Improved the sports/activity service offering for young people with motor disabilities
- At Richardson Hospital, increased the **number of beds for ???AVBC??? victims** and the **number of beds for CVA victims** from 21 to 31
- Harmonization of practices for in-home rehabilitation
- Development of the Early Supported Discharge Program offering intensive in-home rehabilitation for patients with light to moderate stroke

Achievements: Mental Health and Addiction

- Implementation of the Primacy of Patients plan to promote knowledge transfer on patient rights and combatting stigma
- Much work on suicide prevention (policy, training, tool kit)
- Centralization of the adult mental health service hotline
- Continued deployment of a 3rd Assertive Community Treatment (ACT) and Intensive Care Management (ICM) team, increasing places from 162 to 288
- Improved safety in the psychiatric emergency (rounds sheet, patient monitoring)
- Development of the Day Hospital project

Achievements: Support Program for the Autonomy of Seniors (SAPA)

CLSC

- Evaluation of needs and preparation of action plans based on MSSS target for 2020 (90%). Target nearly met this year (86.5%)
- Increased number of hours of direct in-home services
- Harmonized palliative care for patients who wish to die at home
- 577 patients received in-home palliative care

Long-term care

- Purchase of 106 beds to better meet the population's needs and help reduce emergency department crowding
- Work underway to meet the major commitments on CHSLD best practices from the Forum du MSSS in November 2016. Many of our centres offer the 2nd weekly bath
- Major renovations at Henri Bradet Centre

Achievements: Research

Lady Davis Institute

- Organization of the inaugural annual Symposium on Emerging and Complex Infectious Diseases, in collaboration with McGill University and in memory of Dr Mark Wainberg
- The Segal Cancer Proteomics Centre, part of the Pan-Canadian Proteomics Centre, received funding from Genome Canada and Genome BC
- Inauguration of the new Centre of Excellence in Thrombosis and Anticoagulation Care (CETAC)
- Results of major clinical trials in which LDI researchers participated were published in the New England Journal of Medicine:
 - Study by Dr Assouline on lymphocytic leukemia
 - Study by Dr Karaplis on a medication to reinforce and maintain muscle mass
 - Study by Dr Kahn on the treatment of venous thromboembolism

Achievements: Research

Academic Affairs Directorate created by merging the Social Research and the Medical and University Education directorates

- 4,077 internships available
- Workshops to support attending physicians
- SHERPA, the university institute for cultural community research:
 - Mandate as part of the government's 2015-2018 action plan on radicalization
 - 56 active research projects and arrival of nine new researchers
- The CREGÉS continued updating the academic mission of the CIUSSS in social gerontology
 - Brief filed on aging, social exclusion and solidarity in October 2017
 - Organization of multiple related knowledge transfer activities
 - Mandated to draft the policy framework to fight the mistreatment of residents in housing or long-term care. Policy submitted to the MSSS
- Researchers affiliated with the Centre for Interdisciplinary Research in Rehabilitation of Greater Montreal (CRIR) has over 40 active research projects
- The Donald Bergman Research Centre held multiple knowledge transfer activities and new research projects were funded

Achievements: Finance department

- Excellent financial performance – The CIUSSS has maintained a balanced budget for the past three years, as required by our management agreement
- Financial system standardization in October 2017 that merged the systems of nine facilities into one. The Finance team is now more efficient, producing more accurate information in less time
- Payroll system standardization for 10,000 CIUSSS employees in November 2017

Achievements: Technical services

- Multiple reorganization projects at the JGH (addition of 3 dialysis stations, conclusion of Mental Health Phase 1), renovation of Block D on the MAB site
- Site preparation for PRAIDA program refugees
- Delivery of a new clinical research centre (CRU) in Pavilion E
- MSSS approval of Pavilion K Phase 4 which consists of major renovations at the JGH
- 14-month redevelopment project for the Henri Bradet site

Achievements: Purchasing and logistics

- Merger and consolidation of 7 material management systems
- Improved the quality of data on products and services
- Significant support for the PRAIDA program to acquire temporary lodging, maintenance, food, etc.
- Savings of \$1.2 million by contracting out more products and using group purchasing (Sigma-Santé)
- Expanded participation in group purchasing for significant savings

Achievements: Information technology

IT mobilization for the President and CEO's strategic plan to improve service quality:

- Modernization of virtual infrastructure
- Consolidation of computing assets
- Replacement of the interoperability solution
- Unification of multiple administrative systems to simplify the working environment of employees
- To improve user access to proximity services, specialized care clinics were organized and access to the DSQ was improved

Human Resources, Communications and Legal Affairs

- Consolidation of Paie GRH system
- Electronic employee record management
- Implementation of the workplace health and wellness plan
- Start of workforce planning exercise to measure the potential of manager retirements
- Establishment of an integrated leadership and succession management program

Quality and safety

- In preparation for the next accreditation visit, planned for November 2018, 2,000 completed self-assessments
- Administration of organizational surveys on safety culture and staff mobilization
- The vast majority of our management agreement targets were met, from 95% to 100%. In 10 cases, targets were exceeded: imaging access, SAPA users, ICM places and number of FMGs
- MSSS living environment evaluations
 - 1 visit: Maimonides
 - 2 audit visits to Mount Sinai Hospital and the Henri Bradet Centre
 - Action plans underway to meet recommendations

User experience

- Ongoing user experience evaluation in our different sectors (mental health, rehabilitation, frontline services)
 - At the JGH, the user experience was improved in:
 - Information supplied to users (+11%)
 - Cleanliness (+13%)
 - Information given on condition and treatments (+4%)
 - Overall appreciation measured by likelihood of recommending the hospital to other patients (+9%)
 - Front line strength
 - Respect and appointments
 - Long-term care strengths
 - Room personalization
 - Security
- 2,200 volunteers help to improve the user experience throughout the CIUSSS

Performance management

- Development of performance management matrices, from the President and CEO to tactical and operational teams in all sectors
- Implementation of performance war rooms in different clinical departments
- Development and implementation of a safety and quality plan
- Quality and quarterly performance dashboards
 - Board, management committee, clinical advisory committee, per mission
- Support for teams with predictive analyses, e.g.: simulation of hotline and frontline mental health services to better meet patient and user needs

The issues for your CIUSSS

- Provide an exceptional patient experience
- Support projects in the community
- Mobilize staff and physicians
- Implement patient trajectories
- Maintain a balanced budget
- Constantly seek improvement opportunities for our patients, residents and clients
- Maintain a balanced budget

Conclusion

- Year three for the CIUSSS was once again very **intensive** and productive
- We see more and more advantages to being a CIUSSS rather than independent facilities for our users and organizational performance
- We will maintain the momentum of successful consolidation, integration and improvement projects.
- We seek your comments and suggestions!